24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 11 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Future45	
	C C00574533
Check if X 24-hour report 48-hour report New report Amends report fill	ed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Arena Online	02 27 2016
Mailing Address 1780 West Sequoia Vista Circle	Amount
City State Zip Code	37.23
Salt Lake City UT 84104	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type 004	02 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Off	fice Sought: House District:
Hilary Clinton Oppose	President Senate State: AL
Calendar Year-To-Date Per Election for Office Sought Dis 20'	sbursement For:
Full Name of Payee Arena Online	Date of Public Distribution/Dissemination
Mailing Address 1780 West Seguoja Vista Circle	02 27 2016
Mailing Address 1780 West Sequoia Vista Circle	Amount
City State Zip Code	37.23
Salt Lake City UT 84104	Transaction ID : 002 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type O04	M 02
Name of Federal Candidate Support Of	fice Sought: House District:
Hilary Clinton Oppose	X President Senate State: AR
	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	74.46
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Maria Wojciechowski [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	